PTO/SB/05 (08-03) Approved for use through 07/31/2006. OMB 0651-0032
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	U	TILITY	Attorney Docket No.	006593-2020					
Р	-	APPLICATION	First Inventor	Hans Paller					
	TRAN	SMITTAL	Title	CONVECTION OVEN AND RELATED AIR FLOW SYSTEM					
(Only for n	ew nonprovisiona	epplications under 37 CFR 1.53(b))	Express Mail Label No.	ER 341637095 US					
See MPEP o		ION ELEMENTS ming utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450					
2. Goldmin See 31 3. See 3	an original and a int claims small or claims. The claims in call of the claim of the claims are claims or call or care the claims of the claim	[Total Pages 13 ]  Int forth below)  Vereition  Int forth below)  Vereition  Int forth below)  Vereition  Int forth below)  Vereition  Int forth below  Int for	Computer Program  Since Statement  Computer  Specificat  Computer  Specificat  Computer  Specificat  Computer  ACCOMPAN  Specificat  Specificat  Computer  Com	Computer Program (Appendix)  Nucleotide andior Anino Aod Sequence Submission (if applicable, all necessary)  a.					
		ATION, check appropriate box, and sup or in an Application Data Sheet under 3		n below and in the first sentence of the					
Contin	• .			for application No.:					
Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only. The entire disclosure of the prior application from which an oath or declaration is supplied under Box Sh, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadevertently omitted from the submitted application parts.  19. CORRESPONDENCE ADDRESS									
	ner Number:	33375	OR	Correspondence address below					
Name	Thompson Hine LLP								
Address	2000 Courthouse Plaza N.E.  10 West Second Street								
City	Dayton	N Judet	State Ohio	Zip Code 45402-1758					
Country	USA	1	elephone 937-443-6600	Fax 937-443-6635					
Name (Print/Ty	pe) Michael J.	Nieberding	Registration No. (Attorne	ey/Agent)   39,316					
Signature	111	20 Tlale Or	, , , , , , , , , , , , , , , , , , , ,	Date 9/18/2003					
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USP/IO to process) an application. Copinematally is governed by 3 U.S.A. 122 and 3 C.P.H.11-4. In Societoria estamata to lase it amusines to complete, including glatining, preparing, and submitting the completed application from the USPIO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this bursten, should be sent to the Chele Information Officer, U.S. Patient and Trademant, Office, U.S. Department of Commence, p.O. Sen 1450, Nearding, V.A. 22313-1450, D.O.NIT SEND, PEECS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patient Application, Commissioner for Patients, P.O. Sex 1450, Alexandria, VA 22313-1450.

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FFF TO A NOMITTAL	C mplete if Known			
FEE TRANSMITTAL	Application Number			
for FY 2003	Filing Date			
Effective 01/01/2003, Patent fees are subject to annual revision.	First Named Inventor	Hans Paller		
	Examiner Name			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit			

TOTAL AMOUNT OF PAYMENT (\$) 934.00		Attorney Docket No. 1006593-2020					
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
Check Credit card Money Other None	3. A	3. ADDITIONAL FEES					
Order O	<u>Large</u>	Large Entity , Small Entity					
Deposit Account:	Fee Code			Fee	Fee Description		
Account   20-0809	1051	(\$) 130	Code 2051		Surcharge - late filing fee or oath	Fee Paid	
Number Deposit The second Line ALID	1052	50	2052		Surcharge - lete provisional filing fee or		
Account Name	1		1		cover sheet	$\vdash$	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification	-	
Charge fee(s) indicated below Credit any overpayments		2,520	1812	-,	For filing a request for ex parte reexamination		
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after	1 1	
to the above-identified deposit eccount.	١		١		Examiner action		
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month		
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	1253	930	2253	465	Extension for reply within third month		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	⊢	
1001 750 2001 375 Utility filing fee 750.00	1255	1,970	2255	985	Extension for reply within fifth month	+	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal		
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	<b>├</b> ──┤	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute e public use proceeding		
SUBTOTAL (1) (\$) 750.00	1452	110	2452	55	Petition to revive - unavoidable	<b>├</b>	
	1453	1,300	2453	650	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility issue fee (or reissue)	ldash	
Extra Claims below Fee Paid	1502	470	2502	235	Design issue fee		
Total Claims 28 -20** = 8 X 18 = 144	1503	630	2503	315	Plant issue fee		
Claims 3 - 3" = 0 1 X 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1460	130	1460	130	Petitions to the Commissioner		
Multiple Dependent = 144	1807	50	180	7 50	Processing fee under 37 CFR 1.17(q)		
Large Entity   Small Entity	1806	180	180		Submission of Information Disclosure Stmt		
Fee Fee Fee Fee Fee Description Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	40.00	
1202 18 2202 9 Claims in excess of 20	1809	750	280	9 375	Filing a submission efter final rejection		
1201 84 2201 42 Independent claims in excess of 3			١		(37 CFR 1.129(a))	$\vdash$	
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 ** Reissue independent claims	1810	750	281	U 375	For each additional invention to be examined (37 CFR 1.129(b))		
over original patent	180	750	2801	375	Request for Continued Examination (RCE)	$ldsymbol{ld}}}}}}}}}$	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	90	Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 144.00		r fee (s				Ц	
**or number previously paid, if greater; For Reissues, see above	*Rec	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00					
COLORESTED OV	_	==	=	=	(Complete (// engineble))		

SUBAITTEE BY

Makes (Prioritype) Michael J. Nieberding Registrefion No. 39,316 Telephone 937-445-6892
Signature WARNING: Information on this form may become public. Credit card Information should not be Included of this form. Provide credit card Information and authorization on PTO-2038.

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